

UNITED STATES -- PATENT**DECLARATION FOR PATENT APPLICATION**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below), or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **METHOD OF OBTAINING COCHLEAR STRUCTURES, VACCINE COMPOSITIONS, ADJUVANTS AND INTERMEDIATES THEREOF**

the specification of which
(check one)

is attached hereto.

Int'l Filing Date: 11/27/2003;

Int'l Serial No.: PCT/CU03/000016

and was amended on 5/27/2005.
(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any Amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a).

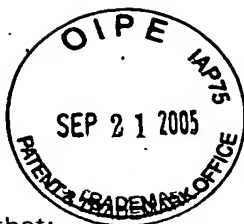
I hereby claim foreign priority benefits under Title 35, United States Code, §119 and/or §371, of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the Application on which priority is claimed:

Prior Foreign Application(s):

Appln. No.	Country	Date Filed	Priority Claimed
CU 2002-0292	Cuba	November 27, 2002	YES
PCT/CU2003/000016	PCT	November 27, 2003	YES <input type="checkbox"/> NO <input type="checkbox"/>
			<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States Application(s) listed below and, insofar as the subject matter of each of the claims of this Application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56(a) which became available between the filing date of the prior application and the national or PCT international filing date of this application

Appln. Serial No.	Filing Date	Status: Patented, Pending, Abandoned
		<input type="checkbox"/> Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned
		<input type="checkbox"/> Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned



Rec'd PCT/PTO 21 SEP 2005
10/536778
Attorney's Docket No.: LEXSA.P32

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute the application entitled, METHOD OF OBTAINING COCHLEAR STRUCTURES, VACCINE COMPOSITIONS, ADJUVANTS AND INTERMEDIATES THEREOF

and to transact all business in the Patent and Trademark Office connected therewith:

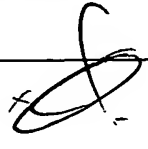
MARVIN FELDMAN, Reg. No. 25,797; CARRIE A. COLBY, Reg. No. 45,667; Andrew F. Young, Reg. No. 44,000
HOWARD N. ARONSON, Reg. No. 27,302; and


MYRON GREENSPAN, Reg. No. 25,680.

Address all telephone calls to **MARVIN FELDMAN**, at telephone number (914) 723-4300, or to the attorney executing the last document.

Address all correspondence to **LACKENBACH SIEGEL LLP**
at **One Chase Road, Scarsdale, New York 10583 U.S.A.**


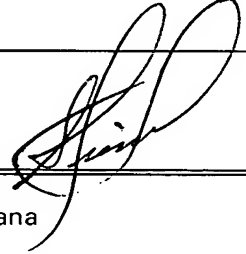

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

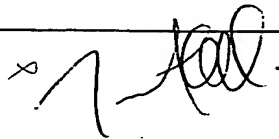

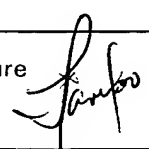
Full Name of First or Sole Inventor <u>PEREZ MARTIN, OLIVER GERMAN</u>	Citizenship: Cubana
RESIDENCE Address -- Street Calle 66 No. 913, entre 9 y 11, Playa	POST OFFICE Address -- Street: SAME AS RESIDENCE
City (Zip): <u>Ciudad Habana</u> CUX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature 

Full Name of Second Joint Inventor <u>BRACHO GRANADO, GUSTAVO RAFAEL</u>	Citizenship: Cubana
RESIDENCE Address -- CALLE 124, No. 7101, entre 71 y 71A, Marianao	POST OFFICE Address: 11500 SAME AS RESIDENCE
City (Zip): <u>Ciudad Habana</u> CUX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature 

G Additional inventors are being named on separately numbered sheets attached hereto.

3-00

Full Name of Third Joint Inventor <u>LASTRE GONZALEZ, MIRIAM DE SAN JUAN BOSCO</u>	Citizenship: Cubana
RESIDENCE Address -- Calle 66 No. 913, entre 9 y 11, Playa	POST OFFICE Address: SAME AS RESIDENCE
City (Zip): <u>Ciudad Habana</u> CVX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature X 
Full Name of Fourth Joint Inventor <u>SIERRA GOZALEZ, VICTORIANO GUSTAVO</u>	Citizenship: Cubana
RESIDENCE Address: Calle 158, No. 3114, entre 31 y 33, Playa	POST OFFICE Address: 11600 SAME AS RESIDENCE
City (Zip): <u>Ciudad Habana</u> CVX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature X 
Full Name of Fifth Joint Inventor <u>CAMPA HUERGO, CONCEPCION</u>	Citizenship: Cubana
RESIDENCE Address: Calle 19, No. 21002, entre 210 y 214, Atabey, Playa	POST OFFICE Address: 11600 SAME AS RESIDENCE
City (Zip): <u>Ciudad Habana</u> CVX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature X 

Full Name of Sixth Joint Inventor <u>MORA GONZALEZ, NESTOR</u>	Citizenship: Cubana
RESIDENCE Address: Avellaneda, edificio 4, entre Maceo y Villamil, Morón	POST OFFICE Address: SAME AS RESIDENCE
City (Zip): <u>Ciego de Avila</u> CUX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature 
Full Name of Seventh Joint Inventor <u>BARBERA MORALES, RAMON FAUSTINO</u>	Citizenship: Cubana
RESIDENCE Address: Calle 210, No. 1913, entre 19 y 21, Reparto Atabey Playa	POST OFFICE Address: 11600 SAME AS RESIDENCE
City (Zip): <u>Ciudad Habana</u> CUX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature 
Full Name of Eighth Joint Inventor <u>DEL CAMPO ALONSO, JUDITH MONICA</u>	Citizenship: Cubana
RESIDENCE Address: Calle 23, No. 508, apto 3B, entre G y H, Plaza de la Revolución	POST OFFICE Address --10400 SAME AS RESIDENCE
City (Zip): <u>Ciudad Habana</u> CUX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature 

<p>9-00</p> <p>Full Name of Ninth Joint Inventor <u>RODRIGUEZ RAMIREZ, TAMARA</u></p>	<p>Citizenship: Cubana</p>
<p>RESIDENCE Address: Calle Céspedes, No. 110, entre Calixto García y Benito Anido, Regla</p>	<p>POST OFFICE Address: 11200 SAME AS RESIDENCE</p>
<p>City (Zip): <u>Ciudad Habana</u> CUX</p>	<p>City (Zip)</p>
<p>State or Country: Cuba</p>	<p>State or Country</p>
<p>Date: Junio 7, 2005</p>	<p>Signature X </p>
<p>10-00</p> <p>Full Name of Tenth Joint Inventor <u>ZAYAS VIGNIER, CARIDAD</u></p>	<p>Citizenship: Cubana</p>
<p>RESIDENCE Address: Calle 27D, No. 12212, entre 122 y 122A, Marianao</p>	<p>POST OFFICE Address: SAME AS RESIDENCE</p>
<p>City (Zip): <u>Ciudad Habana</u> CUX</p>	<p>City (Zip)</p>
<p>State or Country: Cuba</p>	<p>State or Country</p>
<p>Date: Junio 7, 2005</p>	<p>Signature X </p>
<p>11-00</p> <p>Full Name of Eleventh Joint Inventor <u>GIL MARTINEZ, DANAY</u></p>	<p>Citizenship: Cubana</p>
<p>RESIDENCE Address: Calle 158, No. 6522, La Lisa</p>	<p>POST OFFICE Address -- SAME AS RESIDENCE</p>
<p>City (Zip): <u>Ciudad Habana</u> CUX</p>	<p>City (Zip)</p>
<p>State or Country: Cuba</p>	<p>State or Country</p>
<p>Date: Junio 7, 2005</p>	<p>Signature X </p>

12-00

Full Name of Twelfth Joint Inventor TABOADA SUAREZ, CARLOS	Citizenship: Cubana
RESIDENCE Address: Calle 236, edificio 128, Apto 10, entre 35B y 39, San Agustín, La Lisa	POST OFFICE Address: SAME AS RESIDENCE
City (Zip): Ciudad Habana CVX	City (Zip)
State or Country: Cuba	State or Country
Date: Junio 7, 2005	Signature x 